COMMONWEATH OF KENTUCKY CABINET FOR HEALTH AND FAMILY SERVICES DIVISION ADULT & CHILD HEALTH, DEPARTMENT FOR PUBLIC HEALTH FIRST STEPS

PROVIDER AGREEMENT

| THIS PROVIDER AGREEMENT, made and entered into as of theday of 200by and between the Commonwealth of Kentucky, Division Adult & Child Health, Department for Public Health, Kentucky Early Intervention, 275 East Main, Frankfort, Kentucky 40621 hereinafter referred to as ACH and | | | | | | |
|--|--|--|--|--|--|--|
| (Name of Provider) | | | | | | |
| (Address, City, State, Zip of Provider) | | | | | | |
| hereinafter referred to as the Provider. | | | | | | |

WITNESSETH, THAT:

Whereas, the Cabinet for Health and Family Services, in the exercise of its lawful duties in relation to the administration of the <u>First Steps, Kentucky's Early Intervention Program</u>, is required by state regulations and policies to enter into contracts with providers; and

Whereas, the above named provider desires to participate in the First Steps, Kentucky Early Intervention Program;

Now therefore, it is hereby and herewith mutually agreed by and between the parties hereto as follows:

- I. The Provider:
- (1) Agrees to comply with and abide by all current and future applicable federal and state laws and regulations, including the Health Insurance Portability and Accountability Act (HIPAA) and Family Education Rights and Privacy Act, (FERPA) and with First Steps, the Kentucky Early Intervention Program, policies and procedures governing early intervention providers.
- (2) Agrees to comply with the civil rights requirements set forth in 45 CFR PARTS 80, 84, 90. (The Cabinet for Health and Family Services shall make no payment to providers of service who discriminate on the basis of race, color, national origin, sex, disability, religion, or age in the provision of services.)
- (3) Agrees to accept First Steps client referrals without regard to other available payor sources that must be billed before billing Medicaid through CBIS.
- (4) Agrees to maintain such reports as are necessary to disclose the extent of services furnished to First Steps recipients, to assure proper administration of First Steps, and to assure provider's compliance with all applicable statutes and regulations, for a minimum of 5 years and for such additional time as may be necessary in the event of an audit exception or other dispute and to furnish the Division Adult & Child Health, Department for Public Health with any information requested regarding payments claimed for furnishing services.
- (5) Agrees that First Steps recipient records are the property of the Cabinet for Health and Family Services and shall be surrendered immediately upon request. Agrees also to maintain said records in a secure location and environment, free from fire, water, dirt, dust, and humidity, and further agrees to safeguard against loss, defacement and tampering and to provide access to same only by authorized personnel or by any representative of ACH upon reasonable request.
- (6) Agrees to permit representatives of the state or federal government, including the Office of Attorney General and Office of U.S. Attorney to have the right to examine, inspect, copy or audit all records pertaining to the provision of services furnished to First Steps recipients. Such examinations, inspections, copying or audits may be made without prior notice to the provider, and includes the right to question provider's staff on services provided. Any recoupement due to the First Steps program as a result of audit findings will be withheld from the next scheduled payment(s) until the total amount has been recouped unless other arrangements are made.
- (7) Assures that provider is aware of 34 CFR Part 303 and KRS 200.650 to 200.676.

- (8) Agrees to inform the <u>Division Adult & Child Health</u>, <u>Department for Public Health</u>, within 30 days, of any change in the provider name, ownership, licensure status or address.
- (9) Agrees to submit claims for reimbursement to the Central Billing and Information System (CBIS) within 60 days following service delivery, on approved forms, utilizing the appropriate codes as defined in provider manual, bulletin, or other notice.
- (10) Agrees not to seek further payment directly from the family/patient or through a collection agency for such services.
- (11) Agrees to accept payment from the state for claims submitted to the Central Billing and Information System (CBIS) as full and final payment for services rendered, and will not seek further payment from the family of the eligible children for such services beyond the amounts available from third party payers.
- (12) Agrees to maintain coverage and make available, upon request, Certificates of Insurance covering:
 Statutory Worker's Compensation (if required)
 Professional liability insurance
- (13) Agrees to establish and maintain Internet accessibility for all employees listed on the approved Enrollment Form and agrees to keep ACH apprised of a current e-mail address.
- (14) Agrees to complete all required training, prescribed by the ACH, including Orientation, Primary Service Coordination, and IFSP before providing services to the First Steps population. This is not intended as an all-inclusive list
- (15) Agrees to submit:

With this provider agreement, proof of a valid professional license, registration, or certificate that allows the provider to deliver the services for which the provider contracts.

By June 30, 2004, proof of a valid license, registration or certificate that indicates that the provider is allowed to deliver services for the fiscal year of July 1, 2004 to June 30, 2006.

- II. The Division Adult & Child Health, Department for Public Health, agrees, subject to the availability of federal, state and agency funds, to reimburse the provider in accordance with current applicable federal and state laws, rules and regulations and policies for appropriate billings as prescribed by the Cabinet for Health and Family Services, Division Adult & Child Health, Department for Public Health.
- **III.** Either party shall have the right to terminate this agreement at any time upon 30 days written notice served upon the other party by certified or registered mail; provided, however, that the ACH, may terminate this agreement immediately for cause, or in accordance with federal regulations, upon written notice served upon the provider by registered mail with return receipt requested.
- **IV**. If information identified in Section I (15) of this agreement is submitted timely, this Agreement shall begin on the effective date and shall end on June 30, 2005, subject to the availability of funds and the approval of the Government Contract Review Committee of the General Assembly.
- V. Incorporation by Reference. The following material is incorporated by reference:

CBIS Provider Enrollment Form (and any continuation pages)

Electronic Billing Media Addendum

Professional Development Plan for Developmental Interventionist

| PROVIDE | ≣R | | | RTMENT FOR PUBLIC HEALTH FAND CHILD SERVICES | | |
|--|---|--|----------------------------|--|--------------------------------|--|
| BY: | Authorized Officia | | BY: _ | Authorized Official | | |
| NAME: _ | | | NAME | : Ruth Ann Shepherd, M.D. | | |
| TITLE: _ | TTLE: | | | Director | | |
| DATE: | | | DATE: | | | |
| NAME: _ TITLE: _ ADDRES PHONE # | S: | | | | - - - - | |
| All serv copy. | ice providers re | equired to have a state lid | ense mu | st provide ACH with a current | | |
| VIOLATION | ON OF TAX AND I | EMPLOYMENT LAWS. | | | | |
| determina Chapters tax, incon | ation of a violation l 136, 139, 141, 337 ne tax, wages and | by the contractor within the pr 7, 338, 341 and 342. These st | evious five | h, prior to the award of a contract, ar (5) year period of the provisions of he te to the state sales and use tax, cor alth laws, unemployment insurance la | KRS rporate and utility | |
| violation(s | s) to the Commonv | vealth by providing the followi | ng informa | report any such final determination(s tion regarding the final determination cy which issued the final determinati | n(s): the | |
| the provis final dete be ground | sions of those statu rmination as descri ds for the Common | ites which apply to the contractibed above or failure to compl | ctor's opera y with the | e contractor shall be in continuous co ations, and that the contractor's failur above statutes for the duration of the I the contractor's disqualification fron | re to reveal a contract, shall | |
| | | d and has revealed such final | | r more of the above statutes within the tion(s) of violation(s). A list of such | ne previous | |
| | The contractor has not violated any of the provisions of the above statutes within the previous five (5) year period. | | | | | |
| | FIRST PARTY: | | | | | |
| | DEPARTMENT OF PUBLIC HEALTH ADULT AND CHILD HEALTH DIVISION Name of Agency | | | | | |
| | SECOND PARTY | : | | | | |
| | Name | | | | | |
| | BY: Signature | Date | | | | |